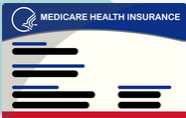


Original Medicare vs. Medicare Advantage

Know the differences before you choose.

	 Original Medicare	 Medicare Advantage
Costs	Part A & Part B costs, including monthly Part B premium. 20% coinsurance for Medicare-covered services with a participating provider after meeting your deductible.	Cost-sharing depends on the plan. Usually pay a copayment for in-network care. Plans may charge a monthly premium in addition to Part B premium.
Supplemental insurance	Choice to pay an additional premium for a Medigap policy to cover Medicare cost-sharing.	Cannot purchase a Medigap policy.
Provider access	Can see any provider and use any facility that accepts Medicare - participating & non-participating.	Typically, can only see in-network providers. Some plans allow you to see out-of-network providers at a higher cost.
Referrals	Do not need referrals for specialists.	May use referrals for specialists.
Drug coverage	Must sign up for a stand-alone Part D prescription drug plan.	In most cases, plan provides prescription drug coverage.
Other benefits	Does not cover routine vision, hearing, or dental services.	May cover additional services like vision, hearing, and/or dental (you may owe an extra premium).
Out-of-pocket limit	No out-of-pocket limit. *Adding a Medigap plan can cap your costs significantly.	Annual out-of-pocket limit. Plan pays the full cost of your health care after you reach the limit.
Prior Authorization	Prior authorization is rarely required for most covered services & procedures.	Prior authorization may be required for certain services or procedures.

Compare Options. Ask Questions. Choose with Confidence. 



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